

In accordance with the provisions of Section 3, Chapter 224, Public Laws of N. C., 1933, and of the order of the Eugenics Board, I hereby authorize. (name of surgeon) to perform the operation of upon said on any day between. and.

Signed.

Title.
Petitioner.

Date.

IV. Form No. 6A - Consent for Operation of Sterilization, Consent of Parent, Guardian, Spouse, or Next of Kin, and Form No. 6B - Consent for Operation of Sterilization, Consent of Patient.

The petitioner should assist the patient and next of kin in filling out these forms. Superintendents of State institutions will frequently need to request county departments of public welfare to interview the next of kin to interpret the advantages of the operation and secure the written consent. Instructions printed on the forms should be followed.

Form 6-A - Consent for Operation of Sterilization.

NORTH CAROLINA,)	Before the
. COUNTY.)	EUGENICS BOARD OF NORTH CAROLINA
IN RE: STERILIZATION)	<u>CONSENT OF PARENT, GUARDIAN, SPOUSE</u>
OF.)	<u>OR NEXT OF KIN</u>

I, the undersigned. (name and relationship to patient), do hereby petition. (Name and title, as Supt. of Public Welfare or Supt. of State Institution where patient is an inmate.) to institute proceedings before the Eugenics Board of North Carolina for the sterilization of, and I do hereby give my consent to the performance of such operation, said operation to be performed in accordance with the authorization of said Board.

Signed:
(Signature of parent, guardian, spouse,
or next of kin)
